

## State of Washington

## Application for a Water Right Permit

SURFACE WA	ATER	GRO	UND	WATER
Permanent	] Temp	orary [	Sho	rt Term



Follow the attached instructions. Attach additional sheets as necessary.

A NON-REFUNDABLE **MINIMUM** FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT	die Apolite de legio die die 1805 (		2
Applicant/Business Name:		Phone No:	Other No:
Address:	nger	206 276 96	87 425 712 0477
Conrad U Address: 506 Bell Str	eet		
City: Edmonds		State: WA	Zip: 98020
Email Address (optional):	9		
Contact Name (if different from abo	ve):	Phone No:	Other No:
Relationship to Applicant:			
Address:			
City:		State:	Zip:
Email Address (optional):			
riefly describe the purpose of your various locations	ur proposed project: <u>Provide</u> on an 80 acre	spot irri	gation at
nticipated length of time to comp	hich water will be applied to a be	eneficial use and lis  Acre-Feet per  Year (AF/YR)	t quantity required for each.  Period of Use (Continuously or Seasonal)
nticipated length of time to compater Use List all purposes for w	hich water will be applied to a be  Rate (check one box only)  Cubic Feet per Second (CFS)  Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	t quantity required for each.  Period of Use (Continuously or Seasonal)
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	d C below						
A.) If Surface Water Source					B.) If Ground Water Source		
Spring Creek River Lake Other:					Well(s) Other:		
Source Name:					Well diameter & depth: 6" - 312 ft.		
Tributary to:					Number of proposed points of withdrawal:		
Number of proposed diversion points:  Do you have an existing diversion?  YES NO				If	If available, attach Water Well Report and pump test.  Well Tag ID No. AKJ 946		
C.) Point of Divers	ion/Witho	lrawal	– Legal I		125 3.0 23 30 00 00 00 00 00 00 00 00 00 00 00 00		is the built of the property of the second o
Parcel No.	1/4	1/4	Section	Township			County
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Lot(s)		Block		101	Subdivision	100 M	all salidie Rechinging die ei
790 Feet ( Nor rom the (NW S Parcel No.					ction 7.		County
			5				
Lot(s)		Block(	(s)		Subdivision	NOT 500 500	t ka datak da ya ka ka 4 Kata data 11. da
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Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Describe your proposed water system (include type and size of devices used to divert or withdraw source):     Thp pump in well PVC pipe in greated for factories springles have a seal of seaker hoses. It present focusions to be served.	
Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION Complete A or B, and C below  A.) Domestic Water Systems only  Projected number of connections to be served:  Type of connections:  (e.g., home, recreational cdbbn)  Do you have a Water System Plan approved by the Washington State Department of Health, Dr Division?  Water System Plan was approved  Water System Number:  Name of water system:  Are you within the service area of an existing water system?  YES NO  If yes, explain why you are unable to connect to the system:  Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES  (rigation)  Total number of acres requested to be irrigated under this application = 10 ACRES  NOTE: Outline the area to be irrigated on your attached map.  Stockwater	
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C.) Water System Planning  Do you have a Water System Plan approved by the Washington State Department of Health, Dr Division? YES NO  If yes, date plan was approved/ Water System Number:  Name of water system:  Are you within the service area of an existing water system? YES NO  If yes, explain why you are unable to connect to the system:  Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES  Irrigation  Fotal number of acres requested to be irrigated under this application =/ ACRES  NOTE: Outline the area to be irrigated on your attached map.	ene jetov zvalo attentali saa
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tras including quality enorcar, a hungarian parting.	phe sun
s the proposed project for a dairy farm?   YES  NO	
Other Proposed Farm Uses	
Describe all proposed uses: game animal feed & cover	

## Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

o you have a controlling interest in a Family Farm Development Permit? TYES X NO	
Yes, enter Permit No:	
Section 8. OTHER WATER USES	
lydropower	
ndicate total feet of head and proposed capacity in kilowatts:	
Describe works:	
ndicate all uses to which power is to be applied:	
ERC License No:	
Iining/Industrial Use	
escribe use, method of supplying and utilizing water:	
Other Use	
	April
Section 9. WATER STORAGE	
Vill you be using a dam, dike, or other structure to retain or store water?  YES NO	
re you proposing to store more than 10 acre-feet of water? YES NO	
re you proposing to store more than 10 acre-feet of water? YES NO  Vill the water depth be 10 feet or more? YES NO	
Vill the water depth be 10 feet or more? ☐ YES ▼ NO	
Vill the water depth be 10 feet or more? ☐ YES ▼ NO	
Vill the water depth be 10 feet or more? ☐ YES ▼ NO	
Will the water depth be 10 feet or more?  YES NO  You answered yes to any of the above questions, please describe:  OTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more and some portion of the storage will be above grade, you must also complete an Application for Permit to C	onstruct a
Will the water depth be 10 feet or more? YES NO  Syou answered yes to any of the above questions, please describe:  OTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more and some portion of the storage will be above grade, you must also complete an Application for Permit to C eservoir and a Dam Construction Permit and Application.  Section 10. DRIVING DIRECTIONS	onstruct a
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## Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name (Applicant or authorized representative)  Convad Unger Print Name (Landowner of Place of Use)	Signature  Signature	$\frac{8/2/07}{\text{Date}}$
Print Name (Landowner of Place of Use)	Signature	Date
Print Name (Landowner of Place of Use)	Signature	Date
CASHIE PO BOX	TMENT OF ECOLOGY ERING SECTION ( 5128 WA 98509-5128	
Please check the region in which your properties.  Southwest Northwest Central		

Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.



Southwest Regional Office: 360-407-6300 Northwest Regional Office: 425-649-7000 Central Regional Office: 509-575-2490 Eastern Regional Office: 509-329-3400